County: Kershaw

Facility Type: Adult Day Care

Facility Name

Location Street

Location City, State

Administrator/Phone

County/Ownership Type

Mailing/Billing Address

Licensee

Licensee

License Nbr/Expiration Date

KERSHAW COUNTY ADULT DAY CARE CENTER

Kershaw / Non-Profit Corporation 30

2204 N BROAD ST PO BOX 331

CAMDEN, SC 29020-2443 FAC.#:803-425-9040 CAMDEN, SC 29021-0331

CARLTON, JOYCE P PH#: 803-425-9040 KERSHAW COUNTY ADULT DAY CARE CENTER INC

Facility Email: RACHUDSON@BELLSOUTH.NET ADC-0091 / 01/31/2015

Number of Participants: 30

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: _____1 Number Licensed Units: _____30

1

Licensed

Units

County: Kershaw

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensed Licensee Units License Nbr/Expiration Date
CAMDEN I	Kershaw / County
975 WATEREE BLVD	
CAMDEN, SC 29020-4134 FAC.#:803-432-0	973
WRIGHT, CRYSTAL J PH#: 803-432-1345	CHESCO SERVICES
Facility Email: S.TURNER@CHESCOSERVICES.	ORG CRC-1525 / 09/30/2014
Alzheimer Care:No Max # Resident	:0 Alzheimer Unit: No Max # Beds: 0
Certifications:None	
CAMDEN II	Kershaw / County
975 WATEREE BLVD	975 WATEREE BLVD
CAMDEN, SC 29020-4134 FAC.#:803-432-1	345 CAMDEN, SC 29020-4134
WRIGHT, CRYSTAL J PH#: 803-432-1345	CHESCO SERVICES
Facility Email: S.TURNER@CHESCOSERVICES.	ORG CRC-1522 / 05/31/2014
Alzheimer Care:No Max # Resident	:0 Alzheimer Unit: No Max # Beds: 0
Certifications:None	
DIXON'S COMMUNITY CARE HOME	Kershaw / Corporation
1456 DIXON RD	PO BOX 306
ELGIN, SC 29045-9030 FAC.#:803-729-43	
DIXON, JAMES M PH#: 803-729-4309	DIXON'S COMMUNITY CARE HOME INC
Facility Email: Not on File	CRC-0934 / 09/30/2014
Alzheimer Care:No Max # Resident	:0 Alzheimer Unit: No Max # Beds: 0
Certifications:None	Kershaw / Sole Proprietorship
FLOWERS RESIDENTIAL CARE FACILITY	, 2010 1109-1100-1100-
855 WATTS HILL RD	855 WATTS HILL RD
LUGOFF, SC 29078-9234 FAC.#:803-438-2	654 LUGOFF, SC 29078-9234 MARY C FLOWERS
FLOWERS, MARY C PH#: 803-438-2654 Facility Email: MFLOW79255@AOL.COM	CRC-0297 / 11/30/2014
Alzheimer Care:Yes Max # Resident	
Certifications: None	· · · · · · · · · · · · · · · · · · ·
FRIENDSHIP COMMUNITY CARE HOME	Kershaw / Sole Proprietorship
298 DOBY ST	298 DOBY ST
CAMDEN, SC 29020-2312 FAC.#:803-432-5	329 CAMDEN, SC 29020-2312
LAWSON, GEOFFREY PH#: 843-382-4223	SHIRLEY D CAMPBELL-JENKINS
Facility Email: Not on File	CRC-0107 / 10/31/2012 (Renewal Pending)
	:0 Alzheimer Unit: No Max # Beds: 0
Alzheimer Care:No Max # Resident	Alzheimer onic. No Max # Beds. o

County: Kershaw

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration D	Licensed Units ate	
HILL COMMUNITY CARE FACILITY	Kershaw / Sole Proprieto	rship 10	
1529 DIXON RD	2326 LOCUST RD		
ELGIN, SC 29045-8957 FAC.#:803-408-1346	COLUMBIA, SC 29223-3835		
HILL, ALICE F PH#: 803-408-1346	ALICE F HILL		
Facility Email: CFB1920@BELLSOUTH.NET	CRC-1152 / 04/30/2015		
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max	k # Beds: 0	
Certifications:None			
J C LARAES SOUTHWINDS ASSISTED LIVING COMMUNITY	Kershaw / Sole Proprieto	rship !	
308 HUMPHRIES RD	PO BOX 1382		
RIDGEWAY, SC 29130-9648 FAC.#:803-438-4052	LUGOFF, SC 29078-1382		
OWENS, JUDY W PH#: 803-438-4052	ANNA L OWENS		
Facility Email: Not on File	CRC-1181 / 09/30/2014		
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max	k # Beds: 0	
Certifications:None			
MORNINGSIDE OF CAMDEN	Kershaw / Ltd. Liability	49	
715 KERSHAW HWY	715 KERSHAW HWY		
CAMDEN, SC 29020-1634 FAC.#:803-713-8668	CAMDEN, SC 29020-1634		
HOYT-ZOELLER, DEANNA J PH#: 803-713-8668	MORNINGSIDE OF CAMDEN LLC		
Facility Email: LICENSING@5SQC.COM	CRC-1259 / 01/31/2015		
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max	k # Beds: 0	
Certifications:None			
PINEDALE RESIDENTIAL CENTER	Kershaw / Corporation	50	
798 HERMITAGE POND RD	798 HERMITAGE POND RD		
CAMDEN, SC 29020-9534 FAC.#:803-432-9900	CAMDEN, SC 29020-9534		
	SHARECARE CORPORATION		
HUDSON, PHILLIP E PH#: 803-432-9900	CRC-0460 / 02/28/2015		
HUDSON, PHILLIP E PH#: 803-432-9900 Facility Email: PHUDSON83@YAHOO.COM			
	Alzheimer Unit: No Max	k # Beds: 0	

County: Kershaw

Facility Type: Home Health

Facility Name County/Ownership Type
Location Street Mailing/Billing Address Licensed
Location City, State Licensee Units
Administrator/Phone License Nbr/Expiration Date

AMEDISYS HOME HEALTH OF CAMDEN Kershaw / Ltd. Liability

1110 BROAD ST STE B 1110 BROAD ST STE B CAMDEN, SC 29020-3624 FAC.#:803-713-9774 CAMDEN, SC 29020-3624

RAPP, SUZANNE PH#: 803-713-9774 AMEDISYS SC LLC

Counties Served: Calhoun, Fairfield, Kershaw, Lexington, Newberry, Orangeburg, Richland License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

KERSHAWHEALTH HOME HEALTH Kershaw / County

124 BATTLESHIP RD 1315 ROBERTS RD CAMDEN, SC 29020 FAC.#:803-425-1182 CAMDEN, SC 29020

MCMASTER, KATHY P PH#: 803-425-1182 KERSHAWHEALTH (BOARD OF TRUSTEES)

Facility Email: MCMASTER@KERSHAWHEALTH.ORG HHA-0080 / 07/31/2014

Counties Served: Kershaw License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

Totals For Facility/License Type: Home I	<u>Health</u>		
Number of Activities/Facilities licensed:	2	Number Licensed Units:	8

County: Kershaw

Facility Type: Hospice Program

Facility Name County/Ownership Type
Location Street Mailing/Billing Address Licensed
Location City, State Licensee Units

Administrator/Phone License Nbr/Expiration Date

KERSHAWHEALTH HOSPICE Kershaw / County

124 BATTLESHIP RD 1315 ROBERTS ST

CAMDEN, SC 29020 FAC.#:803-425-1182 CAMDEN, SC 29020-3798

MCMASTER, KATHY P PH#: 803-425-1182 KERSHAWHEALTH (BOARD OF TRUSTEES)

Facility Email: MCMASTER@KERSHAWHEALTH.ORG HPC-0030 / 06/30/2014

Counties Served: Chesterfield, Darlington, Fairfield, Kershaw, Lancaster, Lee, Richland, Sumter

5

Totals For Facility/License Type: <u>Hospice Program</u>

Number of Activities/Facilities licensed: _____1 Number Licensed Units: _____

County: Kershaw

Facility Type: Hospital or Institutional General Infirmary

Facility Name County/Ownership Type
Location Street Mailing/Billing Address Licensed
Location City, State Licensee Units

Administrator/Phone License Nbr/Expiration Date

KERSHAWHEALTH Kershaw / County 121

1315 ROBERTS ST PO BOX 7003

CAMDEN, SC 29020-3737 FAC.#:803-432-4311 CAMDEN, SC 29021-7003

WEEKS, DONNIE J PH#: 803-432-4311 KERSHAWHEALTH (BOARD OF TRUSTEES)

Facility Email: WEEKS@KERSHAWHEALTH.ORG HTL-0101 / 10/31/2014

Licensed Beds: General: 121 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications:Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: _____1 Number Licensed Units: ____121

County: Kershaw

Facility Type: Nursing Home

Facility Name County/Ownership Type
Location Street Mailing/Billing Address Licensed
Location City, State Licensee Units
Administrator/Phone License Nbr/Expiration Date

KERSHAWHEALTH KARESH LONG TERM CARE Kershaw / County

1315 ROBERTS ST PO BOX 7003

CAMDEN, SC 29020-3737 FAC.#:803-713-6376 CAMDEN, SC 29021-7003

HANLEY, JEANNE H PH#: 803-713-6376 KERSHAWHEALTH (BOARD OF TRUSTEES)

Facility Email: HANLEY@KERSHAWHEALTH.ORG NCF-0313 / 09/30/2014

Licensed Beds: Nursing Home: 96 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident: 0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

SPRINGDALE HEALTHCARE CENTER Kershaw / Ltd. Liability 148

146 BATTLESHIP RD 146 BATTLESHIP RD

CAMDEN, SC 29020-2060 FAC.#:803-432-3741 CAMDEN, SC 29020-2060

SPARKS, DEBORAH PH#: 803-432-3741 PALMETTO SPRINGDALE OPERATING LLC

Facility Email: ADMIN.SPCA.SC@PALMETTOLTC.COM NCF-0925 / 09/30/2014

Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Nursing Home

Number of Activities/Facilities licensed: 2 Number Licensed Units 244

7

May 1, 2014

South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Kershaw

Facility Type: PSAD Outpatient

Facility Name

Location Street

Location City, State

Administrator/Phone

County/Ownership Type

Mailing/Billing Address

Licensee

Units

License Nbr/Expiration Date

ALPHA CENTER Kershaw / County

709 MILL ST 709 MILL ST

CAMDEN, SC 29020-4738 FAC.#:803-432-6902 CAMDEN, SC 29020-4738

NAPPER, PAUL W PH#: 803-432-6902 KERSHAW COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE

Facility Email: MBULLOCK@ALPHACENTERSC.COM OTP-0036 / 10/31/2014

Certifications:None

Totals For Facility/License Type: PSAD Outpatient		
Number of Activities/Facilities licensed:1	Number Licensed Units	3

8

County: Kershaw

Facility Type: Renal Dialysis

Facility Name

Location Street

Location City, State

Administrator/Phone

County/Ownership Type

Mailing/Billing Address

Licensee

Units

License Nbr/Expiration Date

FRESENIUS MEDICAL CARE CAMDEN

Kershaw / Limited Liability

HAILE LN

HAILE LN

CAMDEN, SC 29020-3754 FAC.#:803-425-9000 CAMDEN, SC 29020-3754

ADKINS, PEGGY PH#: 803-425-9000 FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

Facility Email: PEGGY.ADKINS@FMC-NA.COM ERD-0064 / 02/28/2015

Licensed Stations: Hemodialysis: 21 Peritoneal: 0

FRESENIUS MEDICAL CARE LUGOFF-ELGIN Kershaw / Limited Liability 21

909 CAROLINA DR, JONES HILL BUSINESS PARK 909 CAROLINA AVE, JONES HILL BUSINESS PARK
LUGOFF, SC 29078-8766 FAC.#:803-438-0905 LUGOFF, SC 29078-8766

HERRIOTT, YOLANDA C PH#: 803-438-0905 FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

9

0

Facility Email: YOLANDA.HERRIOTT@FMC-NA.COM ERD-158 / 02/28/2015

Licensed Stations: Hemodialysis: 21 Peritoneal:

Totals For Facility/License Type: Renal Dialysis

Number of Activities/Facilities licensed: 2 Number Licensed Units: 42

County: Kershaw

South Carolina Department of Health & Environmental Control Division of Health Licensing

County/Ownership Type

3

Facility Type: Tattoo Facility Facility Name Location Street Location City, State

Mailing/Billing Address Licensed Licensee Units Administrator/Phone License Nbr/Expiration Date COPPER FINCH TATTOO CO Kershaw / Limited Liability

1100 ROSE ST UNIT B PO BOX 691 ELGIN, SC 29045-8339 FAC.#:803-408-6800 ELGIN, SC 29045 ROBERTS JR, EDWARD E PH#: 843-504-6076 COPPER FINCH TATTOO CO LLC Facility Email: COPPERFINCHTATTOO@YAHOO.COM TF-0146 / 11/30/2014

Totals For Facility/License Type: Tattoo Facility Number of Activities/Facilities licensed: _____1 Number Licensed Units:

Number of Activities/Facilities licensed in county of # Lics: <u>Kershaw</u> 20 Number Licensed Units : 608

Report Totals

Total Number of Activities/Facilities licensed _____ 20 Total Number Licensed Units: ____ 608